

Dearness Home Committee of Management

To: Chair and Members
Dearness Home Committee of Management
From: Leslie Hancock, Director of Long-Term Care
Subject: Director’s Report to the Committee of Management for the
Period August 16, 2025, to November 14, 2025
Date:

Recommendation

That on the recommendation of the Director, Long Term Care and with the concurrence of the Deputy City Manager, Social and Health Development, this report related to the Dearness Home **BE RECEIVED** for information.

Linkage to the Corporate Strategic Plan

The Dearness Home works toward the goal of Leading in Public Service by always seeking to improve services for the residents and their families.

The City of London is committed to working in partnership with the community to identify solutions that will drive a strong, deep and inclusive community recovery for London as we move out of and beyond the global COVID-19 pandemic.

Analysis

1.0 Background Information:

1.1 Previous Reports Related to this Matter:

- December 10, 2024, Director's Report, August 16, 2024, to November 15, 2024
- February 25, 2025, Director’s Report, November 16, 2024, to January 31, 2025
- September 16, 2025, Director’s Report, February 1, 2025, to August 16, 2025

2.0 Service Provision Statistics:

Occupancy Average August 16, 2025, to November 14, 2025	Number of Individuals on Waiting List as of October 31, 2025
98.99%	Basic – 368 Private – 244

3.0 Ministry Inspections/Visits:

The Ministry of Long-Term Care visited Dearness Home between August 27 and 28, 2025, to conduct an inspection regarding the Medication Management Protocol and the Falls Prevention and Management Protocol. Written notifications for non-compliance were issued in relation to the Falls Prevention and Management Program providing strategies to reduce or mitigate falls, including the monitoring of residents, the review of residents’ drug regimes, the implementation of restorative care approaches and the use of equipment, supplies, devices and assistive aides.
A copy of the Public Report is available at the Dearness Home Committee of Management meeting on December 2nd, 2025, and can be found under as attached as Appendix A.

The Ministry of Long-Term Care visited Dearness Home between September 15-17, 2025, to conduct an inspection related to Infection Prevention and Control. There were no findings of non-compliance.

A copy of the Public Report is available at the Dearness Home Committee of Management meeting on December 2nd, 2025, and can be found under as attached as Appendix B.

4.0 Mandatory and Critical Incident Reporting:

The Ministry of Long-Term Care (MOLTC) has a Mandatory and Critical Incident Reporting process which requires reporting of all critical incidents in the Home.

The following critical incidents were reported to the MOLTC during the reporting period:

Incident Type and Number (n) of Incidents	Issues	Status
Disease Outbreak: - Unknown Pathogen (1) - Rhino/ Enterovirus (1)	An unknown pathogen was declared August 26 on Birch Walk and resolved on September 2.	In each instance of outbreak, daily surveillance and infection control measures put in place to minimize the chance of spread and the duration of outbreak.
	A Rhino/ Enterovirus was declared on September 29 by Public Health on Forest Glen and resolved on October 15.	
Abuse of a resident by anyone or neglect of a resident by the licensee or staff that resulted in harm or a risk of harm to the resident Physical (1)	Friend of staff member witnessed a family care provider becoming physically aggressive with a resident.	In each instance, followed City of London/ Dearness Home process detailed in Resident Abuse Policy.
		Investigations completed, and all appropriate actions taken with staff and residents involved.

5.0 Infection Control:

- The Home remains compliant with the Fixing Long-Term Care Act (FLTCA) and continues to follow best practice guidelines for audits. Approximately 300 audits were completed during this reporting period.
- The Infection Control and Prevention (IPAC) team continues to review and strengthen strategies aimed at improving IPAC goals.
 - In collaboration with the Home’s Nurse Practitioner, and Dietitian, interactive education sessions have been provided to staff across the Home.

- The team continues to work closely with the Environmental Services Manager (ESM) to review policies and procedures and support ongoing staff education. Moving forward, a skills-based questionnaire will be distributed to identify further educational needs.
- In addition, the Home is currently administering flu and COVID-19 vaccines to both staff and residents. As of this reporting period, 128 staff members (30%) have received their flu vaccine, and 170 residents (70%) have been vaccinated.
- The IPAC team attended the Respiratory Day event hosted by MLHU, where updates were shared regarding outbreak management. Notably,
 - One confirmed case of influenza now constitutes an outbreak.
 - The composition of this year's flu vaccine has changed slightly, with the Yamagata strain removed.
 - COVID-19 continues to circulate year-round, and while overall rates have decreased, cases and related deaths are still being reported. The Home experienced one COVID-19 case during this quarter, with no further transmission identified and deaths related to this case.
- The Home completed its annual review of the Outbreak Preparedness Plan during this quarter. This review ensures alignment with current Ministry direction and reinforces staff understanding of outbreak declaration procedures.
- The ESM and IPAC team have been working diligently to review and enhance housekeeping procedures and policies. With these improvements, the ESM has made significant progress in refining processes and helping to break the chain of infection within the Home.

6.0 Health and Safety:

Regular monthly inspections were conducted during the reporting period. The Joint Health and Safety Committee (JHSC) meets monthly to discuss findings from the monthly inspections.

7.0 General Updates:

7.1 Highlights in the Community Life/ Recreation Department:

- The Home's Volunteer Coordinator recruited 8 new Volunteers to the growing program during this reporting period.
- 3 casual Recreation Coordinators resigned in this reporting period and recruitment is in the process.
- The Manager of Community Life is one of 6 Gentle Persuasive Approach (GPA) Coaches at the Home. 6 GPA Classes were hosted, and over 70 staff and volunteers on the Gentle Persuasive Approach to Dementia Care were educated.
- Dearness Home residents won Entertainment Draw for use of the Community Suite at Canada Life Place in 2026 for a London Knights Game!
- The Community Life team successfully onboarded a new software called Welbi. The team has worked diligently in the last 2 months to upload 243 assessments and care plans into the new software, which now enhances our workflow, documents increasing resident engagement, and improves family satisfaction.
- The Home continues to work on enhancing spiritual care for our residents.
- Our Volunteer Coordinator attended both a LAVA (London and Area Association for Volunteer Administration) and a PAVRO ([Professional Association of Volunteer Leaders - Ontario](#)) education event.
- On September 6th, the Home hosted the annual Big Tent family event. The event was a huge success with a beautiful fall color theme, live music, vintage cars,

apple fritters, BBQ lunch, alpacas, miniature ponies, a Thirstation, and a Kids Zone area. There was a featured Master Art Class that 8 of our residents had been a part of and were showcased at this event. Feedback from both Family and Resident Council was unanimous that the September Fall Harvest Festival will now be our annual event going forward.

- September 15th was Resident Council Week where our council hosted fun placemats, an information table in the lobby, a Drag Queen Bingo and ice cream treats to raise awareness and advocacy to ensure all residents know they are welcome to attend any meeting of the council. A Resident submitted his poem on the Resident Bill of Rights for the OARC (Ontario Association of Residents' Councils) Residents' Council Week Contest and won a \$50 TimHortons gift card.
- The Community Life department welcomed a new Fanshawe Recreation & Leisure student doing her placement in our Oakdale secured Home Area.
- September 22nd week was all about celebrating and thanking our staff during CarePartner Week with lots of food, fun, and prize draws.
- October 31st was the submission deadline for the TRO (Therapeutic Recreation Ontario) Conference in 2026. An abstract was submitted in partnership with the Upper Thames River Conservation Authority (UTRCA) to share our Legacy project here at Dearness Home's Stream of Dreams.
- Our Dearness Home Auxiliary is working diligently to showcase their Bazaar fund raiser on November 22nd.

7.2 Highlights in the Dietary Department:

- Special meals were provided for residents on Labour Day, Thanksgiving and Halloween, along with themed snacks and placemats.
- "Around the world" theme menus continue to be offered to residents with placemats designed by recreation.
- The Home's full-time Registered Dietician (RD) continues as the nutritional lead on the Clinical Pathways project that is underway in the Home.
- The Home hosted a Student Dietitian from Brescia College for 6 weeks during her Food Production Placement.
- Planning underway for Christmas and New Years meals, as well as meals for Staff on Christmas Day.
- Next phase of Mealsuite usage – recording temperatures of food items directly into the system.
- New Tray service policy education for PSW and dietary team underway – policy is simplified and condensed for clarity.
- The Registered Dietitian provided ongoing education on dietary management of constipation during a Registered Staff meeting.
- Care Partner week provided daily treats to all staff members – including taco in a bag, coffee and donuts, and assorted chips/chocolate bars.
- New Environmental Services Supervisor, Elnara Medvedeva, joined the Dietary/Environmental team.
- Ongoing recruitment for dietary aides and cooks.

7.3 Highlights in the Nursing Department Include:

- On September 29th, Dearness Home raised the Survivors Flag to honour all survivors, families, and communities impacted by the residential school system in Canada and to share their expression of remembrance. A small ceremony involving Dearness residents and staff was performed during the raising by our Director of Care who is of Anishinaabe heritage. She facilitated a smudge for attendees followed by a performance of a song on a hand drum in the traditional Anishinaabemowin language.
- In late September, the Home completed the Institute for Safe Medication Practices (ISMP) Self-Assessment submission. ISMP Canada is an independent, non-profit group dedicated to preventing medication errors and improving patient

safety. The Self-Assessment is completed by an interdisciplinary team including our Medical Director, Pharmacist, Director of Care, Assistant Director of Care, Dietician, and Infection Control Manager. It is designed to evaluate the safety of our medication system, identify vulnerabilities and opportunities for improvement, as well as increased awareness of safe medication systems.

- In October, the Nursing Management team completed their recruitment of a permanent Assistant Director of Care (ADOC).
- Dearness began preparing for the transition to the interRAI Long-Term Care Facilities (LTCF) assessment. Our home is amongst the third and final cohort to make the required transition which will be finalized on January 1, 2026. Compared to the soon to be decommissioned RAI-MDS 2.0 system, the LTCF provides more comprehensive, standardized, and clinically relevant data to improve care planning, resource allocation, and quality initiatives. It uses a common language and assessment criteria, making it easier to track resident progress over time, identify those at risk, and ensure consistent, high-quality care across different health systems. This will be a big change for all our staff in the home as the current RAI-MDS 2.0 system has been in place since 2003.
- In November, the Home held its annual Years of Service Recognition event. This event is a way for the leadership in the Home to formally acknowledge the loyalty and dedication of each staff member receiving a Years of Service Certificate. The service is always well attended and received.

7.4 Highlights in the Environmental Department Include:

- Roofing restoration project is now complete.
- Staffing has been adjusted, and there is now a housekeeper on each home unit every day.
- New laundry sorting process is instituted on the units to reduce sorting in the laundry area.
- Project underway to replace the Automatic Transfer Switch in the electrical room.
- Worxhub maintenance tracking project started to enable proper tracking and submission of work requests and preventative maintenance tasks.
- Ladder training provided to all maintenance staff.

Submitted by:	Leslie Hancock, Director, Long Term Care
Recommended by:	Leslie Hancock, Director, Long Term Care
Concurred by:	Kevin Dickins, Deputy City Manager, Social and Health Development

CC: S. Datars Bere, City Manager
J. Millman, Senior Financial Business Administrator
L. Marshall, Solicitor
A. Hagan, Manager, Labour Relations

K. Beaune, Employee Relations Advisor



Inspection Report Under the
Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District
130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report
Report Issue Date: August 28, 2025
Inspection Number: 2025-1539-0005
Inspection Type: Complaint Critical Incident
Licensee: The Corporation of the City of London
Long Term Care Home and City: Dearness Home for Senior Citizens, London

INSPECTION SUMMARY
The inspection occurred onsite on the following date(s): August 27, 28, 2025 The following intake(s) were inspected: -Intake: #00154404 - a complaint related to resident care. -Intake: #00155732 - Critical Incident System Report M514-000018-25 related to a fall.

The following **Inspection Protocols** were used during this inspection:

- Medication Management
- Falls Prevention and Management

INSPECTION RESULTS



Inspection Report Under the Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care

Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District

130 Dufferin Avenue, 4th Floor
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WRITTEN NOTIFICATION: Falls prevention and management

NC #001 Written Notification pursuant to FLTCA, 2021, s. 154 (1) 1.

Non-compliance with: O. Reg. 246/22, s. 54 (1)

Falls prevention and management

s. 54 (1) The falls prevention and management program must, at a minimum, provide for strategies to reduce or mitigate falls, including the monitoring of residents, the review of residents' drug regimes, the implementation of restorative care approaches and the use of equipment, supplies, devices and assistive aids. O. Reg. 246/22, s. 54 (1).

The licensee has failed to ensure that a falls prevention strategy was functioning properly.

A resident had a fall with significant change in condition. After investigation by the home, it was identified that a falls prevention strategy did not function properly prior to the fall.

Sources: Resident clinical records, a technical report from the home, and interview with staff of the home.



Inspection Report Under the
Fixing Long-Term Care Act, 2021

Ministry of Long-Term Care
Long-Term Care Operations Division
Long-Term Care Inspections Branch

London District
130 Dufferin Avenue, 4th Floor
London, ON, N6A 5R2
Telephone: (800) 663-3775

Public Report
Report Issue Date: September 18, 2025
Inspection Number: 2025-1539-0006
Inspection Type: Critical Incident
Licensee: The Corporation of the City of London
Long Term Care Home and City: Dearness Home for Senior Citizens, London

INSPECTION SUMMARY
The inspection occurred onsite on the following dates: September 15 - 18, 2025 The following intake was inspected: Intake: #00156353 - Critical Incident System: M514-000019-25 - Related to infection prevention and control

The following **Inspection Protocols** were used during this inspection:

Infection Prevention and Control

INSPECTION RESULTS

During the course of this inspection, the inspector(s) made relevant observations, reviewed records and conducted interviews, as applicable. There were no findings of non-compliance.